

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 0700180A  
PAYMENT ISSUE DATE: 08/20/2008

ALAMEDA COUNTY TREASURER  
1221 OAK ST

OAKLAND CA 94612

Financial Activity

**Additional Description:**

VEHICLE CODE SECTION 9250.19 SUBDIVISION (B), FINGERPRINT ID PROGRAM

**Fingerprint ID**

**Fiscal Year: 2007**

**Collection Period:** 04/01/2008 **To** 06/30/2008

**Payment Calculations:**

Fingerprint Fees Collected - April 2008	108,365.89
Fingerprint Fees Collected - May 2008	108,769.52
Fingerprint Fees Collected - June 2008	106,899.94

<b>Authorized Fee or Offset</b>	<b>\$532.66</b>
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<b>Gross Claim</b>	<b>\$323,502.69</b>
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<b>Net Claim / Payment Amount</b>	<b>\$323,502.69</b>
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<b>YTD Amount:</b>	<b>\$1,238,500.57</b>
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For assistance, please call: Cathy Leal at (916) 323-8077

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 0700180A  
PAYMENT ISSUE DATE: 08/20/2008

ALPINE COUNTY TREASURER  
PO BOX 217

MARKLEEVILLE CA 96120

Financial Activity

**Additional Description:**

VEHICLE CODE SECTION 9250.19 SUBDIVISION (B), FINGERPRINT ID PROGRAM

Fingerprint ID

Fiscal Year: 2007

Collection Period: 04/01/2008 To 06/30/2008

Payment Calculations:

Fingerprint Fees Collected - April 2008	154.23
Fingerprint Fees Collected - May 2008	135.32
Fingerprint Fees Collected - June 2008	138.41

Authorized Fee or Offset	\$0.77
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Gross Claim	\$427.19
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Net Claim / Payment Amount	\$427.19
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YTD Amount:	\$1,794.34
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For assistance, please call: Cathy Leal at (916) 323-8077

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 0700180A  
PAYMENT ISSUE DATE: 08/20/2008

COLUSA COUNTY TREASURER  
546 JAY ST

COLUSA CA 95932

Financial Activity

**Additional Description:**

VEHICLE CODE SECTION 9250.19 SUBDIVISION (B), FINGERPRINT ID PROGRAM

Fingerprint ID

Fiscal Year: 2007

Collection Period: 04/01/2008 To 06/30/2008

Payment Calculations:

Fingerprint Fees Collected - April 2008	2,202.08
Fingerprint Fees Collected - May 2008	1,975.12
Fingerprint Fees Collected - June 2008	2,019.98

<b>Authorized Fee or Offset</b>	<b>\$9.92</b>
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<b>Gross Claim</b>	<b>\$6,187.26</b>
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<b>Net Claim / Payment Amount</b>	<b>\$6,187.26</b>
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<b>YTD Amount:</b>	<b>\$23,061.25</b>
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For assistance, please call: Cathy Leal at (916) 323-8077

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 0700180A  
PAYMENT ISSUE DATE: 08/20/2008

CONTRA COSTA COUNTY TREASURER  
625 COURT ST RM 102

MARTINEZ CA 94553

Financial Activity

**Additional Description:**

VEHICLE CODE SECTION 9250.19 SUBDIVISION (B), FINGERPRINT ID PROGRAM

Fingerprint ID

Fiscal Year: 2007

Collection Period: 04/01/2008 To 06/30/2008

Payment Calculations:

Fingerprint Fees Collected - April 2008	77,826.32
Fingerprint Fees Collected - May 2008	78,230.45
Fingerprint Fees Collected - June 2008	77,723.19

<b>Authorized Fee or Offset</b>	<b>\$383.86</b>
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<b>Gross Claim</b>	<b>\$233,396.10</b>
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<b>Net Claim / Payment Amount</b>	<b>\$233,396.10</b>
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<b>YTD Amount:</b>	<b>\$892,526.53</b>
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For assistance, please call: Cathy Leal at (916) 323-8077

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 0700180A  
PAYMENT ISSUE DATE: 08/20/2008

**DEL NORTE COUNTY TREASURER**

981 H ST STE 150

CRESCENT CITY CA 95531

Financial Activity

**Additional Description:**

VEHICLE CODE SECTION 9250.19 SUBDIVISION (B), FINGERPRINT ID PROGRAM

**Fingerprint ID**

**Fiscal Year: 2007**

**Collection Period:** 04/01/2008 **To** 06/30/2008

**Payment Calculations:**

Fingerprint Fees Collected - April 2008	2,175.13
Fingerprint Fees Collected - May 2008	2,110.26
Fingerprint Fees Collected - June 2008	2,121.50

<b>Authorized Fee or Offset</b>	<b>\$10.15</b>
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<b>Gross Claim</b>	<b>\$6,396.74</b>
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<b>Net Claim / Payment Amount</b>	<b>\$6,396.74</b>
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<b>YTD Amount:</b>	<b>\$23,610.38</b>
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For assistance, please call: Cathy Leal at (916) 323-8077

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 0700180A  
PAYMENT ISSUE DATE: 08/20/2008

EL DORADO COUNTY TREASURER

360 FAIR LN

PLACERVILLE CA 95667

Financial Activity

**Additional Description:**

VEHICLE CODE SECTION 9250.19 SUBDIVISION (B), FINGERPRINT ID PROGRAM

Fingerprint ID

Fiscal Year: 2007

Collection Period: 04/01/2008 To 06/30/2008

Payment Calculations:

Fingerprint Fees Collected - April 2008	17,190.87
Fingerprint Fees Collected - May 2008	17,471.25
Fingerprint Fees Collected - June 2008	16,919.44

Authorized Fee or Offset	\$83.44
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Gross Claim	\$51,498.12
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Net Claim / Payment Amount	\$51,498.12
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YTD Amount:	\$194,016.30
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For assistance, please call: Cathy Leal at (916) 323-8077

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 0700180A  
PAYMENT ISSUE DATE: 08/20/2008

FRESNO COUNTY TREASURER

PO BOX 1406

SACRAMENTO CA 95812

Financial Activity

**Additional Description:**

VEHICLE CODE SECTION 9250.19 SUBDIVISION (B), FINGERPRINT ID PROGRAM

Fingerprint ID

Fiscal Year: 2007

Collection Period: 04/01/2008 To 06/30/2008

Payment Calculations:

Fingerprint Fees Collected - April 2008	63,478.05
Fingerprint Fees Collected - May 2008	61,659.60
Fingerprint Fees Collected - June 2008	61,594.41

Authorized Fee or Offset	\$301.79
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Gross Claim	\$186,430.27
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Net Claim / Payment Amount	\$186,430.27
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YTD Amount:	\$701,708.87
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For assistance, please call: Cathy Leal at (916) 323-8077

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 0700180A  
PAYMENT ISSUE DATE: 08/20/2008

GLENN COUNTY TREASURER  
PO BOX 151

WILLOWS CA 95988

Financial Activity

**Additional Description:**

VEHICLE CODE SECTION 9250.19 SUBDIVISION (B), FINGERPRINT ID PROGRAM

Fingerprint ID

Fiscal Year: 2007

Collection Period: 04/01/2008 To 06/30/2008

Payment Calculations:

Fingerprint Fees Collected - April 2008	2,671.01
Fingerprint Fees Collected - May 2008	2,566.55
Fingerprint Fees Collected - June 2008	2,724.09

Authorized Fee or Offset	\$13.15
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Gross Claim	\$7,948.50
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Net Claim / Payment Amount	\$7,948.50
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YTD Amount:	\$30,572.96
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For assistance, please call: Cathy Leal at (916) 323-8077

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 0700180A  
PAYMENT ISSUE DATE: 08/20/2008

**HUMBOLDT COUNTY TREASURER**

825 FIFTH ST RM 125

EUREKA CA 95501

Financial Activity

**Additional Description:**

VEHICLE CODE SECTION 9250.19 SUBDIVISION (B), FINGERPRINT ID PROGRAM

**Fingerprint ID**

**Fiscal Year: 2007**

**Collection Period:** 04/01/2008 **To** 06/30/2008

**Payment Calculations:**

Fingerprint Fees Collected - April 2008	11,646.25
Fingerprint Fees Collected - May 2008	12,068.11
Fingerprint Fees Collected - June 2008	11,579.75

<b>Authorized Fee or Offset</b>	<b>\$57.18</b>
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<b>Gross Claim</b>	<b>\$35,236.93</b>
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<b>Net Claim / Payment Amount</b>	<b>\$35,236.93</b>
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<b>YTD Amount:</b>	<b>\$132,956.15</b>
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For assistance, please call: Cathy Leal at (916) 323-8077

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 0700180A  
PAYMENT ISSUE DATE: 08/20/2008

INYO COUNTY TREASURER  
PO BOX 0

INDEPENDENCE CA 93526

Financial Activity

**Additional Description:**

VEHICLE CODE SECTION 9250.19 SUBDIVISION (B), FINGERPRINT ID PROGRAM

Fingerprint ID

Fiscal Year: 2007

Collection Period: 04/01/2008 To 06/30/2008

Payment Calculations:

Fingerprint Fees Collected - April 2008	2,102.52
Fingerprint Fees Collected - May 2008	2,122.47
Fingerprint Fees Collected - June 2008	1,930.53

<b>Authorized Fee or Offset</b>	<b>\$10.28</b>
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<b>Gross Claim</b>	<b>\$6,145.24</b>
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<b>Net Claim / Payment Amount</b>	<b>\$6,145.24</b>
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<b>YTD Amount:</b>	<b>\$23,905.67</b>
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For assistance, please call: Cathy Leal at (916) 323-8077

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 0700180A  
PAYMENT ISSUE DATE: 08/20/2008

KERN COUNTY TREASURER  
PO BOX 981240

SACRAMENTO CA 95798 1240

Financial Activity

**Additional Description:**

VEHICLE CODE SECTION 9250.19 SUBDIVISION (B), FINGERPRINT ID PROGRAM

Fingerprint ID

Fiscal Year: 2007

Collection Period: 04/01/2008 To 06/30/2008

Payment Calculations:

Fingerprint Fees Collected - April 2008	61,281.25
Fingerprint Fees Collected - May 2008	58,728.23
Fingerprint Fees Collected - June 2008	57,582.55

Authorized Fee or Offset	\$282.93
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Gross Claim	\$177,309.10
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Net Claim / Payment Amount	\$177,309.10
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YTD Amount:	\$657,842.11
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For assistance, please call: Cathy Leal at (916) 323-8077

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 0700180A  
PAYMENT ISSUE DATE: 08/20/2008

KINGS COUNTY TREASURER  
PO BOX 1406

SACRAMENTO CA 95812 1406

Financial Activity

**Additional Description:**

VEHICLE CODE SECTION 9250.19 SUBDIVISION (B), FINGERPRINT ID PROGRAM

Fingerprint ID

Fiscal Year: 2007

Collection Period: 04/01/2008 To 06/30/2008

Payment Calculations:

Fingerprint Fees Collected - April 2008	8,989.79
Fingerprint Fees Collected - May 2008	8,767.38
Fingerprint Fees Collected - June 2008	8,481.89

Authorized Fee or Offset	\$42.59
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Gross Claim	\$26,196.47
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Net Claim / Payment Amount	\$26,196.47
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YTD Amount:	\$99,025.45
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For assistance, please call: Cathy Leal at (916) 323-8077

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 0700180A  
PAYMENT ISSUE DATE: 08/20/2008

LASSEN COUNTY TREASURER  
COUNTY COURTHOUSE RM 103

SUSANVILLE CA 96130

Financial Activity

**Additional Description:**

VEHICLE CODE SECTION 9250.19 SUBDIVISION (B), FINGERPRINT ID PROGRAM

Fingerprint ID

Fiscal Year: 2007

Collection Period: 04/01/2008 To 06/30/2008

Payment Calculations:

Fingerprint Fees Collected - April 2008	2,878.30
Fingerprint Fees Collected - May 2008	2,757.30
Fingerprint Fees Collected - June 2008	2,925.58

<b>Authorized Fee or Offset</b>	<b>\$13.28</b>
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<b>Gross Claim</b>	<b>\$8,547.90</b>
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<b>Net Claim / Payment Amount</b>	<b>\$8,547.90</b>
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<b>YTD Amount:</b>	<b>\$30,886.18</b>
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For assistance, please call: Cathy Leal at (916) 323-8077

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 0700180A  
PAYMENT ISSUE DATE: 08/20/2008

LOS ANGELES COUNTY TREASURER  
PO BOX 1859

SACRAMENTO CA 95812

Financial Activity

**Additional Description:**

VEHICLE CODE SECTION 9250.19 SUBDIVISION (B), FINGERPRINT ID PROGRAM

Fingerprint ID

Fiscal Year: 2007

Collection Period: 04/01/2008 To 06/30/2008

Payment Calculations:

Fingerprint Fees Collected - April 2008	677,420.59
Fingerprint Fees Collected - May 2008	660,123.20
Fingerprint Fees Collected - June 2008	652,815.57

<b>Authorized Fee or Offset</b>	<b>\$3,316.36</b>
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<b>Gross Claim</b>	<b>\$1,987,042.97</b>
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<b>Net Claim / Payment Amount</b>	<b>\$1,987,042.97</b>
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<b>YTD Amount:</b>	<b>\$7,711,010.14</b>
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For assistance, please call: Cathy Leal at (916) 323-8077

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 0700180A  
PAYMENT ISSUE DATE: 08/20/2008

MADERA COUNTY TREASURER  
C/O BANK OF AMERICA  
PO BOX 1859  
SACRAMENTO CA 95812 1859

Financial Activity

**Additional Description:**

VEHICLE CODE SECTION 9250.19 SUBDIVISION (B), FINGERPRINT ID PROGRAM

Fingerprint ID

Fiscal Year: 2007

Collection Period: 04/01/2008 To 06/30/2008

Payment Calculations:

Fingerprint Fees Collected - April 2008	10,567.76
Fingerprint Fees Collected - May 2008	10,184.08
Fingerprint Fees Collected - June 2008	10,094.85

<b>Authorized Fee or Offset</b>	<b>\$49.82</b>
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<b>Gross Claim</b>	<b>\$30,796.87</b>
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<b>Net Claim / Payment Amount</b>	<b>\$30,796.87</b>
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<b>YTD Amount:</b>	<b>\$115,848.07</b>
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For assistance, please call: Cathy Leal at (916) 323-8077

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 0700180A  
PAYMENT ISSUE DATE: 08/20/2008

MARIN COUNTY TREASURER  
PO BOX 4220  
CIVIC CENTER  
SAN RAFAEL CA 94913

Financial Activity

**Additional Description:**

VEHICLE CODE SECTION 9250.19 SUBDIVISION (B), FINGERPRINT ID PROGRAM

**Fingerprint ID**

**Fiscal Year: 2007**

**Collection Period:** 04/01/2008 **To** 06/30/2008

**Payment Calculations:**

Fingerprint Fees Collected - April 2008	20,361.69
Fingerprint Fees Collected - May 2008	20,055.25
Fingerprint Fees Collected - June 2008	20,348.68

<b>Authorized Fee or Offset</b>	<b>\$101.48</b>
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<b>Gross Claim</b>	<b>\$60,664.14</b>
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<b>Net Claim / Payment Amount</b>	<b>\$60,664.14</b>
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<b>YTD Amount:</b>	<b>\$235,953.31</b>
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For assistance, please call: Cathy Leal at (916) 323-8077

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 0700180A  
PAYMENT ISSUE DATE: 08/20/2008

**MENDOCINO COUNTY TREASURER**  
501 LOW GAP RD 1060

UKIAH CA 95482

Financial Activity

**Additional Description:**

VEHICLE CODE SECTION 9250.19 SUBDIVISION (B), FINGERPRINT ID PROGRAM

**Fingerprint ID**

**Fiscal Year: 2007**

**Collection Period:** 04/01/2008 **To** 06/30/2008

**Payment Calculations:**

Fingerprint Fees Collected - April 2008	9,101.88
Fingerprint Fees Collected - May 2008	8,960.84
Fingerprint Fees Collected - June 2008	8,989.72

<b>Authorized Fee or Offset</b>	<b>\$43.97</b>
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<b>Gross Claim</b>	<b>\$27,008.47</b>
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<b>Net Claim / Payment Amount</b>	<b>\$27,008.47</b>
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<b>YTD Amount:</b>	<b>\$102,241.34</b>
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For assistance, please call: Cathy Leal at (916) 323-8077

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 0700180A  
PAYMENT ISSUE DATE: 08/20/2008

MERCED COUNTY TREASURER  
PO BOX 981311

WEST CA 95798 1311  
SACRAMENTO

Financial Activity

**Additional Description:**

VEHICLE CODE SECTION 9250.19 SUBDIVISION (B), FINGERPRINT ID PROGRAM

Fingerprint ID

Fiscal Year: 2007

Collection Period: 04/01/2008 To 06/30/2008

Payment Calculations:

Fingerprint Fees Collected - April 2008	17,269.22
Fingerprint Fees Collected - May 2008	16,403.88
Fingerprint Fees Collected - June 2008	16,506.39

Authorized Fee or Offset	\$82.05
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Gross Claim	\$50,097.44
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Net Claim / Payment Amount	\$50,097.44
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YTD Amount:	\$190,778.01
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For assistance, please call: Cathy Leal at (916) 323-8077

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 0700180A  
PAYMENT ISSUE DATE: 08/20/2008

MONO COUNTY TREASURER  
PO BOX 495

BRIDGEPORT CA 93517

Financial Activity

**Additional Description:**

VEHICLE CODE SECTION 9250.19 SUBDIVISION (B), FINGERPRINT ID PROGRAM

Fingerprint ID

Fiscal Year: 2007

Collection Period: 04/01/2008 To 06/30/2008

Payment Calculations:

Fingerprint Fees Collected - April 2008	1,286.10
Fingerprint Fees Collected - May 2008	1,280.67
Fingerprint Fees Collected - June 2008	1,302.65

<b>Authorized Fee or Offset</b>	<b>\$6.26</b>
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<b>Gross Claim</b>	<b>\$3,863.16</b>
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<b>Net Claim / Payment Amount</b>	<b>\$3,863.16</b>
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<b>YTD Amount:</b>	<b>\$14,564.64</b>
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For assistance, please call: Cathy Leal at (916) 323-8077

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 0700180A  
PAYMENT ISSUE DATE: 08/20/2008

MONTEREY COUNTY TREASURER  
PO BOX 1406

SACRAMENTO CA 95812 1406

Financial Activity

**Additional Description:**

VEHICLE CODE SECTION 9250.19 SUBDIVISION (B), FINGERPRINT ID PROGRAM

Fingerprint ID

Fiscal Year: 2007

Collection Period: 04/01/2008 To 06/30/2008

Payment Calculations:

Fingerprint Fees Collected - April 2008	30,026.48
Fingerprint Fees Collected - May 2008	29,636.18
Fingerprint Fees Collected - June 2008	29,949.46

<b>Authorized Fee or Offset</b>	<b>\$146.54</b>
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<b>Gross Claim</b>	<b>\$89,465.58</b>
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<b>Net Claim / Payment Amount</b>	<b>\$89,465.58</b>
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<b>YTD Amount:</b>	<b>\$340,721.95</b>
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For assistance, please call: Cathy Leal at (916) 323-8077

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 0700180A  
PAYMENT ISSUE DATE: 08/20/2008

**NAPA COUNTY TREASURER**

1195 THIRD ST RM 108

NAPA CA 94559 3035

Financial Activity

**Additional Description:**

VEHICLE CODE SECTION 9250.19 SUBDIVISION (B), FINGERPRINT ID PROGRAM

**Fingerprint ID**

**Fiscal Year: 2007**

**Collection Period:** 04/01/2008 **To** 06/30/2008

**Payment Calculations:**

Fingerprint Fees Collected - April 2008	11,411.18
Fingerprint Fees Collected - May 2008	11,364.69
Fingerprint Fees Collected - June 2008	11,795.58

<b>Authorized Fee or Offset</b>	<b>\$56.60</b>
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<b>Gross Claim</b>	<b>\$34,514.85</b>
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<b>Net Claim / Payment Amount</b>	<b>\$34,514.85</b>
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<b>YTD Amount:</b>	<b>\$131,609.09</b>
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For assistance, please call: Cathy Leal at (916) 323-8077

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 0700180A  
PAYMENT ISSUE DATE: 08/20/2008

ORANGE COUNTY TREASURER  
PO BOX 981024

WEST CA 95798 1024  
SACRAMENTO

Financial Activity

**Additional Description:**

VEHICLE CODE SECTION 9250.19 SUBDIVISION (B), FINGERPRINT ID PROGRAM

Fingerprint ID

Fiscal Year: 2007

Collection Period: 04/01/2008 To 06/30/2008

Payment Calculations:

Fingerprint Fees Collected - April 2008	221,582.56
Fingerprint Fees Collected - May 2008	222,047.15
Fingerprint Fees Collected - June 2008	214,302.28

<b>Authorized Fee or Offset</b>	<b>\$1,098.64</b>
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<b>Gross Claim</b>	<b>\$656,833.35</b>
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<b>Net Claim / Payment Amount</b>	<b>\$656,833.35</b>
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<b>YTD Amount:</b>	<b>\$2,554,501.35</b>
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For assistance, please call: Cathy Leal at (916) 323-8077

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 0700180A  
PAYMENT ISSUE DATE: 08/20/2008

PLACER COUNTY TREASURER  
PO BOX 7790

AUBURN CA 95604

Financial Activity

**Additional Description:**

VEHICLE CODE SECTION 9250.19 SUBDIVISION (B), FINGERPRINT ID PROGRAM

Fingerprint ID

Fiscal Year: 2007

Collection Period: 04/01/2008 To 06/30/2008

Payment Calculations:

Fingerprint Fees Collected - April 2008	29,303.12
Fingerprint Fees Collected - May 2008	30,392.53
Fingerprint Fees Collected - June 2008	30,535.25

<b>Authorized Fee or Offset</b>	<b>\$104.40</b>
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<b>Gross Claim</b>	<b>\$90,126.50</b>
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<b>Net Claim / Payment Amount</b>	<b>\$90,126.50</b>
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<b>YTD Amount:</b>	<b>\$242,745.22</b>
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For assistance, please call: Cathy Leal at (916) 323-8077

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 0700180A  
PAYMENT ISSUE DATE: 08/20/2008

RIVERSIDE COUNTY TREASURER  
C/O UNION BANK OF CA ST GOV  
PO BOX 4035  
SACRAMENTO CA 95812 4035

Financial Activity

**Additional Description:**

VEHICLE CODE SECTION 9250.19 SUBDIVISION (B), FINGERPRINT ID PROGRAM

Fingerprint ID

Fiscal Year: 2007

Collection Period: 04/01/2008 To 06/30/2008

Payment Calculations:

Fingerprint Fees Collected - April 2008	152,016.18
Fingerprint Fees Collected - May 2008	146,031.22
Fingerprint Fees Collected - June 2008	142,743.69

<b>Authorized Fee or Offset</b>	<b>\$723.44</b>
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<b>Gross Claim</b>	<b>\$440,067.65</b>
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<b>Net Claim / Payment Amount</b>	<b>\$440,067.65</b>
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<b>YTD Amount:</b>	<b>\$1,682,090.27</b>
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For assistance, please call: Cathy Leal at (916) 323-8077

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 0700180A  
PAYMENT ISSUE DATE: 08/20/2008

SACRAMENTO COUNTY TREASURER  
PO BOX 980264

WEST CA 95798 0264  
SACRAMENTO

Financial Activity

**Additional Description:**

VEHICLE CODE SECTION 9250.19 SUBDIVISION (B), FINGERPRINT ID PROGRAM

Fingerprint ID

Fiscal Year: 2007

Collection Period: 04/01/2008 To 06/30/2008

Payment Calculations:

Fingerprint Fees Collected - April 2008	100,639.81
Fingerprint Fees Collected - May 2008	102,334.45
Fingerprint Fees Collected - June 2008	100,359.40

<b>Authorized Fee or Offset</b>	<b>\$490.37</b>
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<b>Gross Claim</b>	<b>\$302,843.29</b>
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<b>Net Claim / Payment Amount</b>	<b>\$302,843.29</b>
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<b>YTD Amount:</b>	<b>\$1,140,176.68</b>
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For assistance, please call: Cathy Leal at (916) 323-8077

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 0700180A  
PAYMENT ISSUE DATE: 08/20/2008

**SAN BENITO COUNTY TREASURER**  
COURTHOUSE  
440 FIFTH ST RM 107  
HOLLISTER CA 95023

Financial Activity

**Additional Description:**

VEHICLE CODE SECTION 9250.19 SUBDIVISION (B), FINGERPRINT ID PROGRAM

**Fingerprint ID**

**Fiscal Year: 2007**

**Collection Period:** 04/01/2008 **To** 06/30/2008

**Payment Calculations:**

Fingerprint Fees Collected - April 2008	4,750.15
Fingerprint Fees Collected - May 2008	4,560.31
Fingerprint Fees Collected - June 2008	4,639.19

<b>Authorized Fee or Offset</b>	<b>\$22.45</b>
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<b>Gross Claim</b>	<b>\$13,927.20</b>
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<b>Net Claim / Payment Amount</b>	<b>\$13,927.20</b>
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<b>YTD Amount:</b>	<b>\$52,210.07</b>
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For assistance, please call: Cathy Leal at (916) 323-8077

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 0700180A  
PAYMENT ISSUE DATE: 08/20/2008

SAN BERNARDINO CO TREASURER  
PO BOX 1859

SACRAMENTO CA 95812

Financial Activity

**Additional Description:**

VEHICLE CODE SECTION 9250.19 SUBDIVISION (B), FINGERPRINT ID PROGRAM

Fingerprint ID

Fiscal Year: 2007

Collection Period: 04/01/2008 To 06/30/2008

Payment Calculations:

Fingerprint Fees Collected - April 2008	148,223.98
Fingerprint Fees Collected - May 2008	142,695.76
Fingerprint Fees Collected - June 2008	139,298.62

<b>Authorized Fee or Offset</b>	<b>\$708.76</b>
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<b>Gross Claim</b>	<b>\$429,509.60</b>
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<b>Net Claim / Payment Amount</b>	<b>\$429,509.60</b>
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<b>YTD Amount:</b>	<b>\$1,647,977.46</b>
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For assistance, please call: Cathy Leal at (916) 323-8077

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 0700180A  
PAYMENT ISSUE DATE: 08/20/2008

SAN DIEGO COUNTY TREASURER  
PO BOX 2920

SACRAMENTO CA 95812 2920

Financial Activity

**Additional Description:**

VEHICLE CODE SECTION 9250.19 SUBDIVISION (B), FINGERPRINT ID PROGRAM

Fingerprint ID

Fiscal Year: 2007

Collection Period: 04/01/2008 To 06/30/2008

Payment Calculations:

Fingerprint Fees Collected - April 2008	231,710.70
Fingerprint Fees Collected - May 2008	227,893.30
Fingerprint Fees Collected - June 2008	223,051.01

<b>Authorized Fee or Offset</b>	<b>\$1,124.37</b>
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<b>Gross Claim</b>	<b>\$681,530.64</b>
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<b>Net Claim / Payment Amount</b>	<b>\$681,530.64</b>
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<b>YTD Amount:</b>	<b>\$2,614,331.21</b>
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For assistance, please call: Cathy Leal at (916) 323-8077

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 0700180A  
PAYMENT ISSUE DATE: 08/20/2008

**SAN FRANCISCO COUNTY TREASURER**

PO BOX 2920

SACRAMENTO CA 95814 2920

Financial Activity

**Additional Description:**

VEHICLE CODE SECTION 9250.19 SUBDIVISION (B), FINGERPRINT ID PROGRAM

**Fingerprint ID**

**Fiscal Year: 2007**

**Collection Period:** 04/01/2008 **To** 06/30/2008

**Payment Calculations:**

Fingerprint Fees Collected - April 2008	41,463.07
Fingerprint Fees Collected - May 2008	41,586.87
Fingerprint Fees Collected - June 2008	44,136.50

<b>Authorized Fee or Offset</b>	<b>\$210.67</b>
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<b>Gross Claim</b>	<b>\$126,975.77</b>
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<b>Net Claim / Payment Amount</b>	<b>\$126,975.77</b>
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<b>YTD Amount:</b>	<b>\$489,849.33</b>
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For assistance, please call: Cathy Leal at (916) 323-8077

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 0700180A  
PAYMENT ISSUE DATE: 08/20/2008

**SAN JOAQUIN COUNTY TREASURER**  
PO BOX 981355

WEST CA 95798 1355  
SACRAMENTO

Financial Activity

**Additional Description:**

VEHICLE CODE SECTION 9250.19 SUBDIVISION (B), FINGERPRINT ID PROGRAM

**Fingerprint ID**

**Fiscal Year: 2007**

**Collection Period:** 04/01/2008 **To** 06/30/2008

**Payment Calculations:**

Fingerprint Fees Collected - April 2008	48,542.72
Fingerprint Fees Collected - May 2008	47,478.58
Fingerprint Fees Collected - June 2008	48,518.94

<b>Authorized Fee or Offset</b>	<b>\$236.20</b>
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<b>Gross Claim</b>	<b>\$144,304.04</b>
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<b>Net Claim / Payment Amount</b>	<b>\$144,304.04</b>
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<b>YTD Amount:</b>	<b>\$549,197.77</b>
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For assistance, please call: Cathy Leal at (916) 323-8077

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 0700180A  
PAYMENT ISSUE DATE: 08/20/2008

SAN LUIS OBISPO COUNTY TREASURER  
PO BOX 1149

SAN LUIS OBISPO CA 93406

Financial Activity

**Additional Description:**

VEHICLE CODE SECTION 9250.19 SUBDIVISION (B), FINGERPRINT ID PROGRAM

Fingerprint ID

Fiscal Year: 2007

Collection Period: 04/01/2008 To 06/30/2008

Payment Calculations:

Fingerprint Fees Collected - April 2008	23,822.80
Fingerprint Fees Collected - May 2008	23,069.32
Fingerprint Fees Collected - June 2008	22,598.73

<b>Authorized Fee or Offset</b>	<b>\$113.30</b>
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<b>Gross Claim</b>	<b>\$69,377.55</b>
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<b>Net Claim / Payment Amount</b>	<b>\$69,377.55</b>
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<b>YTD Amount:</b>	<b>\$263,448.67</b>
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For assistance, please call: Cathy Leal at (916) 323-8077

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 0700180A  
PAYMENT ISSUE DATE: 08/20/2008

**SAN MATEO COUNTY TREASURER**  
C/O UNION BANK ST GOVT DEPT  
PO BOX 4035  
Sacramento CA 95812

Financial Activity

**Additional Description:**

VEHICLE CODE SECTION 9250.19 SUBDIVISION (B), FINGERPRINT ID PROGRAM

**Fingerprint ID**

**Fiscal Year: 2007**

**Collection Period:** 04/01/2008 **To** 06/30/2008

**Payment Calculations:**

Fingerprint Fees Collected - April 2008	62,138.94
Fingerprint Fees Collected - May 2008	61,447.71
Fingerprint Fees Collected - June 2008	61,356.10

<b>Authorized Fee or Offset</b>	<b>\$300.51</b>
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<b>Gross Claim</b>	<b>\$184,642.24</b>
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<b>Net Claim / Payment Amount</b>	<b>\$184,642.24</b>
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<b>YTD Amount:</b>	<b>\$698,738.45</b>
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For assistance, please call: Cathy Leal at (916) 323-8077

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 0700180A  
PAYMENT ISSUE DATE: 08/20/2008

SANTA BARBARA COUNTY TREASURER  
PO BOX 579

SANTA BARBARA CA 93102

Financial Activity

**Additional Description:**

VEHICLE CODE SECTION 9250.19 SUBDIVISION (B), FINGERPRINT ID PROGRAM

Fingerprint ID

Fiscal Year: 2007

Collection Period: 04/01/2008 To 06/30/2008

Payment Calculations:

Fingerprint Fees Collected - April 2008	31,747.65
Fingerprint Fees Collected - May 2008	31,841.11
Fingerprint Fees Collected - June 2008	30,636.47

<b>Authorized Fee or Offset</b>	<b>\$154.81</b>
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<b>Gross Claim</b>	<b>\$94,070.42</b>
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<b>Net Claim / Payment Amount</b>	<b>\$94,070.42</b>
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<b>YTD Amount:</b>	<b>\$359,959.18</b>
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For assistance, please call: Cathy Leal at (916) 323-8077

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 0700180A  
PAYMENT ISSUE DATE: 08/20/2008

SANTA CLARA CO TREASURER  
PO BOX 1406

SACRAMENTO CA 95812

Financial Activity

**Additional Description:**

VEHICLE CODE SECTION 9250.19 SUBDIVISION (B), FINGERPRINT ID PROGRAM

Fingerprint ID

Fiscal Year: 2007

Collection Period: 04/01/2008 To 06/30/2008

Payment Calculations:

Fingerprint Fees Collected - April 2008	131,187.01
Fingerprint Fees Collected - May 2008	130,608.64
Fingerprint Fees Collected - June 2008	132,064.00

<b>Authorized Fee or Offset</b>	<b>\$644.63</b>
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<b>Gross Claim</b>	<b>\$393,215.02</b>
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<b>Net Claim / Payment Amount</b>	<b>\$393,215.02</b>
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<b>YTD Amount:</b>	<b>\$1,498,861.05</b>
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For assistance, please call: Cathy Leal at (916) 323-8077

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 0700180A  
PAYMENT ISSUE DATE: 08/20/2008

SANTA CRUZ COUNTY TREASURER  
PO BOX 1817

SANTA CRUZ CA 95061

Financial Activity

**Additional Description:**

VEHICLE CODE SECTION 9250.19 SUBDIVISION (B), FINGERPRINT ID PROGRAM

Fingerprint ID

Fiscal Year: 2007

Collection Period: 04/01/2008 To 06/30/2008

Payment Calculations:

Fingerprint Fees Collected - April 2008	20,401.36
Fingerprint Fees Collected - May 2008	20,639.60
Fingerprint Fees Collected - June 2008	20,633.43

<b>Authorized Fee or Offset</b>	<b>\$101.24</b>
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<b>Gross Claim</b>	<b>\$61,573.15</b>
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<b>Net Claim / Payment Amount</b>	<b>\$61,573.15</b>
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<b>YTD Amount:</b>	<b>\$235,387.51</b>
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For assistance, please call: Cathy Leal at (916) 323-8077

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 0700180A  
PAYMENT ISSUE DATE: 08/20/2008

**SHASTA COUNTY TREASURER**

PO BOX 1859

SACRAMENTO CA 95812 1859

Financial Activity

**Additional Description:**

VEHICLE CODE SECTION 9250.19 SUBDIVISION (B), FINGERPRINT ID PROGRAM

**Fingerprint ID**

**Fiscal Year: 2007**

**Collection Period:** 04/01/2008 **To** 06/30/2008

**Payment Calculations:**

Fingerprint Fees Collected - April 2008	17,439.14
Fingerprint Fees Collected - May 2008	16,929.58
Fingerprint Fees Collected - June 2008	17,163.92

<b>Authorized Fee or Offset</b>	<b>\$82.63</b>
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<b>Gross Claim</b>	<b>\$51,450.01</b>
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<b>Net Claim / Payment Amount</b>	<b>\$51,450.01</b>
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<b>YTD Amount:</b>	<b>\$192,133.80</b>
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For assistance, please call: Cathy Leal at (916) 323-8077

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 0700180A  
PAYMENT ISSUE DATE: 08/20/2008

**SISKIYOU COUNTY TREASURER**

311 FOURTH ST RM 104

YREKA CA 96097

Financial Activity

**Additional Description:**

VEHICLE CODE SECTION 9250.19 SUBDIVISION (B), FINGERPRINT ID PROGRAM

**Fingerprint ID**

**Fiscal Year: 2007**

**Collection Period:** 04/01/2008 **To** 06/30/2008

**Payment Calculations:**

Fingerprint Fees Collected - April 2008	5,241.06
Fingerprint Fees Collected - May 2008	5,227.61
Fingerprint Fees Collected - June 2008	4,953.59

<b>Authorized Fee or Offset</b>	<b>\$24.30</b>
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<b>Gross Claim</b>	<b>\$15,397.96</b>
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<b>Net Claim / Payment Amount</b>	<b>\$15,397.96</b>
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<b>YTD Amount:</b>	<b>\$56,491.86</b>
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For assistance, please call: Cathy Leal at (916) 323-8077

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 0700180A  
PAYMENT ISSUE DATE: 08/20/2008

**SOLANO COUNTY T TC**  
675 TEXAS ST STE 1900

FAIRFIELD CA 94533 6337

Financial Activity

**Additional Description:**

VEHICLE CODE SECTION 9250.19 SUBDIVISION (B), FINGERPRINT ID PROGRAM

**Fingerprint ID**

**Fiscal Year: 2007**

**Collection Period:** 04/01/2008 **To** 06/30/2008

**Payment Calculations:**

Fingerprint Fees Collected - April 2008	32,507.21
Fingerprint Fees Collected - May 2008	32,499.38
Fingerprint Fees Collected - June 2008	32,189.08

<b>Authorized Fee or Offset</b>	<b>\$156.59</b>
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<b>Gross Claim</b>	<b>\$97,039.08</b>
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<b>Net Claim / Payment Amount</b>	<b>\$97,039.08</b>
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<b>YTD Amount:</b>	<b>\$364,105.07</b>
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For assistance, please call: Cathy Leal at (916) 323-8077

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 0700180A  
PAYMENT ISSUE DATE: 08/20/2008

SONOMA COUNTY TREASURER  
PO BOX 1204

SACRAMENTO CA 95812 1204

Financial Activity

**Additional Description:**

VEHICLE CODE SECTION 9250.19 SUBDIVISION (B), FINGERPRINT ID PROGRAM

**Fingerprint ID**

**Fiscal Year: 2007**

**Collection Period:** 04/01/2008 **To** 06/30/2008

**Payment Calculations:**

Fingerprint Fees Collected - April 2008	41,647.69
Fingerprint Fees Collected - May 2008	40,795.47
Fingerprint Fees Collected - June 2008	41,167.22

<b>Authorized Fee or Offset</b>	<b>\$202.17</b>
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<b>Gross Claim</b>	<b>\$123,408.21</b>
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<b>Net Claim / Payment Amount</b>	<b>\$123,408.21</b>
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<b>YTD Amount:</b>	<b>\$470,075.56</b>
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For assistance, please call: Cathy Leal at (916) 323-8077

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 0700180A  
PAYMENT ISSUE DATE: 08/20/2008

STANISLAUS COUNTY TREASURER  
PO BOX 3052

MODESTO CA 95353 3052

Financial Activity

**Additional Description:**

VEHICLE CODE SECTION 9250.19 SUBDIVISION (B), FINGERPRINT ID PROGRAM

Fingerprint ID

Fiscal Year: 2007

Collection Period: 04/01/2008 To 06/30/2008

Payment Calculations:

Fingerprint Fees Collected - April 2008	38,432.94
Fingerprint Fees Collected - May 2008	37,784.13
Fingerprint Fees Collected - June 2008	37,804.76

<b>Authorized Fee or Offset</b>	<b>\$186.43</b>
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<b>Gross Claim</b>	<b>\$113,835.40</b>
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<b>Net Claim / Payment Amount</b>	<b>\$113,835.40</b>
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<b>YTD Amount:</b>	<b>\$433,471.92</b>
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For assistance, please call: Cathy Leal at (916) 323-8077

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 0700180A  
PAYMENT ISSUE DATE: 08/20/2008

TRINITY CO TREASURER  
PO BOX 1297

WEAVERVILLE CA 96093 1297

Financial Activity

**Additional Description:**

VEHICLE CODE SECTION 9250.19 SUBDIVISION (B), FINGERPRINT ID PROGRAM

**Fingerprint ID**

**Fiscal Year: 2007**

**Collection Period:** 04/01/2008 **To** 06/30/2008

**Payment Calculations:**

Fingerprint Fees Collected - April 2008	1,588.16
Fingerprint Fees Collected - May 2008	1,627.92
Fingerprint Fees Collected - June 2008	1,568.33

<b>Authorized Fee or Offset</b>	<b>\$7.40</b>
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<b>Gross Claim</b>	<b>\$4,777.01</b>
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<b>Net Claim / Payment Amount</b>	<b>\$4,777.01</b>
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<b>YTD Amount:</b>	<b>\$17,196.77</b>
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For assistance, please call: Cathy Leal at (916) 323-8077

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 0700180A  
PAYMENT ISSUE DATE: 08/20/2008

**TULARE COUNTY TREASURER**  
COUNTY CIVIC CENTER RM 103E  
221 SOUTH MOONEY BL  
VISALIA CA 93291

Financial Activity

**Additional Description:**

VEHICLE CODE SECTION 9250.19 SUBDIVISION (B), FINGERPRINT ID PROGRAM

**Fingerprint ID**

**Fiscal Year: 2007**

**Collection Period:** 04/01/2008 **To** 06/30/2008

**Payment Calculations:**

Fingerprint Fees Collected - April 2008	30,385.14
Fingerprint Fees Collected - May 2008	29,242.79
Fingerprint Fees Collected - June 2008	29,114.37

<b>Authorized Fee or Offset</b>	<b>\$142.05</b>
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<b>Gross Claim</b>	<b>\$88,600.25</b>
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<b>Net Claim / Payment Amount</b>	<b>\$88,600.25</b>
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<b>YTD Amount:</b>	<b>\$330,279.44</b>
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For assistance, please call: Cathy Leal at (916) 323-8077

08/13/2008

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 0700180A  
PAYMENT ISSUE DATE: 08/20/2008

TUOLUMNE COUNTY TREASURER  
2 SOUTH GREEN ST

SONORA CA 95370

Financial Activity

**Additional Description:**

VEHICLE CODE SECTION 9250.19 SUBDIVISION (B), FINGERPRINT ID PROGRAM

Fingerprint ID

Fiscal Year: 2007

Collection Period: 04/01/2008 To 06/30/2008

Payment Calculations:

Fingerprint Fees Collected - April 2008	5,934.59
Fingerprint Fees Collected - May 2008	5,977.12
Fingerprint Fees Collected - June 2008	5,768.29

<b>Authorized Fee or Offset</b>	<b>\$28.80</b>
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<b>Gross Claim</b>	<b>\$17,651.20</b>
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<b>Net Claim / Payment Amount</b>	<b>\$17,651.20</b>
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<b>YTD Amount:</b>	<b>\$66,961.94</b>
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For assistance, please call: Cathy Leal at (916) 323-8077

08/13/2008

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 0700180A  
PAYMENT ISSUE DATE: 08/20/2008

**VENTURA COUNTY TREASURER**  
C/O WELLS FARGO BANK  
PO BOX 980307  
WEST CA 95798 0307  
SACRAMENTO

Financial Activity

**Additional Description:**

VEHICLE CODE SECTION 9250.19 SUBDIVISION (B), FINGERPRINT ID PROGRAM

**Fingerprint ID**

**Fiscal Year: 2007**

**Collection Period:** 04/01/2008 **To** 06/30/2008

**Payment Calculations:**

Fingerprint Fees Collected - April 2008	66,321.23
Fingerprint Fees Collected - May 2008	65,706.17
Fingerprint Fees Collected - June 2008	63,159.99

<b>Authorized Fee or Offset</b>	<b>\$318.89</b>
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<b>Gross Claim</b>	<b>\$194,868.50</b>
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<b>Net Claim / Payment Amount</b>	<b>\$194,868.50</b>
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<b>YTD Amount:</b>	<b>\$741,473.62</b>
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For assistance, please call: Cathy Leal at (916) 323-8077

08/13/2008

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 0700180A  
PAYMENT ISSUE DATE: 08/20/2008

YOLO COUNTY TREASURER

PO BOX 1995

WOODLAND CA 95695

Financial Activity

**Additional Description:**

VEHICLE CODE SECTION 9250.19 SUBDIVISION (B), FINGERPRINT ID PROGRAM

Fingerprint ID

Fiscal Year: 2007

Collection Period: 04/01/2008 To 06/30/2008

Payment Calculations:

Fingerprint Fees Collected - April 2008	14,482.33
Fingerprint Fees Collected - May 2008	14,600.87
Fingerprint Fees Collected - June 2008	14,675.03

<b>Authorized Fee or Offset</b>	<b>\$70.84</b>
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<b>Gross Claim</b>	<b>\$43,687.39</b>
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<b>Net Claim / Payment Amount</b>	<b>\$43,687.39</b>
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<b>YTD Amount:</b>	<b>\$164,713.99</b>
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08/13/2008

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